

FINANCIAL AFFIDAVIT

CJA 23
(Rev. 5/98)

IN SUPPORT OF REQUEST FOR ATTORNEY EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEES

IN UNITED STATES MAGISTRATE DISTRICT APPEALS COURT or OTHER PANEL (Specify below)
IN THE CASE OF

United States vs. Robert Freeman

FOR Worther Dystnt
AT Chicago IL

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

Robert Freeman

FILED
DEC 12 1987

DEC 19 2007

Box DEB 10-2007
Misnomer

CHARGE/OFFENSE (describe if applicable & check box if applicable) Felony or
~~felony~~ Discretionary
8 USC 841 (c)
Clerk, U.S. District Court
Magistrate Judge Stanley R. Frankier
21 USC 846
United States District Court

- Defendant - Adult
 Defendant - Juvenile
 Appellant
 Probation Violator
 Parole Violator
 Habeas Petitioner
 2255 Petitioner
 Material Witness
 Other (Specify) _____

DOCKET NUMBERS	
Magistrate	
District Court 07CR843-9	
Court of Appeals	

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOY- MENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self Employed		
	Name and address of employer: _____		
	IF YES, how much do you earn per month? \$ <u>300</u>	IF NO, give month and year of last employment _____ How much did you earn per month? \$ _____	
	If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	_____	
IF YES, how much does your Spouse earn per month? \$ _____	If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____		
ASSETS	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY \$ <u>300 per month</u>	SOURCES <u>Self-employed Party Promoter</u>	
	CASH	Have you any cash on hand or money in savings or checking account? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ <u>150</u>	
PROP- ERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	IF YES, GIVE THE VALUE AND \$ <u>200</u>	VALUE <u>1998</u> DESCRIPTION <u>Nissan Maxima</u>	
DEPENDENTS	MARITAL STATUS <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	Total No. of Dependents <u>5</u>	elationship to them _____ _____ _____
	DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	APARTMENT OR HOME: <u>cell phone</u>	Cr _____

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) 12/19/07

**SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)**

► Robert Freeman